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SERIAL NUMBER 10/717,890	FILING DATE 11/20/2003  RULE	CLASS 128	GROUP ART UNIT 3743	ATTORNEY DOCKET NO. 12310-1140
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *THW*This application is a CIP of 10/046,767 01/17/2002 ABN *THW*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *THW*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	GA	DRAWING 2	CLAIMS 16	CLAIMS 4
Verified and Acknowledged  Examiner's Signature	<i>THW</i>	Initials			

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## TITLE

Oro-pharyngeal airway with breath monitor

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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